

# Coordinated Care Initiative (CCI)/ Cal MediConnect Advisory Committee

Wednesday, Septmeber 3, 2014

Member Attendance: James Beaubeaux, San Diego County Medical Society (SDCMC); Amber Cutler, National Senior Citizens Law Center; Joe Diaz, California Association of Health Facilities (CAHF); Debra Fitzgerald, Healthy San Diego (HSD); Kim Fritz, Care1st; Paula Goncalves, Community Research Foundation (CRF); Lisa Hayes, Molina Healthcare; Pam Hough, Light Bridge Hospice; Pam Hoye, Dual Elgible Consumer; Carol Hubbard, Program of All-Inclusive care for the Elderly (PACE); Kim Huynh, Harbage Consulting; Molly Kintz, Loving Care Adult Day Helath Care (CBAS); Jenel Lim, Aging and Independence Services (AIS); Greg Knoll, Consumer Center for Health Education and Advocacy (CCHEA); Rogelio Lopez, Health Net; Sabra Matovsky, Molina Healthcare; Pamela Mokler, Care1st; Vickie Molzen, AIS; Juanita Rettinghaus, Edgemoor; Bud Sayles, In-Home Support Services Public Authority (IHSS); George Scolari, Community Health Group; Mark Sellers, AIS; Peter Shih, HSD; Ann Thompson, Kaiser Permanente; David Weil, Elder Law and Advocacy- HICAP; Cheryl Wilson, San Diego Senior Alliance and Judith Yates, Hospital Association of San Diego and Imperial Counties (HASDIC).

<u>Guest Attendance</u>: Alla'a Ali, Health and Human Services Agency (HHSA), Scott Crawford, Kaiser Permanente; Alejandra Gaona, Care1st; Sue Harris, Therapy Specialists; Mathew Kostrinsky, United Domestic Workers of America (UDW) and Terri Williams, Harbage Consulting.

#### **Welcome and Introductions**

## Additions to the Agenda

None

#### Review and Approval of the August 6, 2014 Meeting Minutes

• The August 6, 2014 meeting minutes were approved as amended. Add an action item under Viet News proposal for Harbage to report if they can pay for the Viet News segment as part of their outreach effort.

### **CCI Consumer Feedback Updates**

- Ombudsman
  - The outreach program submitted a request for funding for the anticipated number of enrollees in August based on the high number of enrollees in July.
  - The call volume leveled in August despite having 17% of the enrollee population calling the information line.
  - o In August, there were 2,540 calls made to the Statewide Health Consumer Alliance Toll Free Line with an average talk time of 6 min, 51 sec.
  - o Of the 2,540 total calls received, 871 were for San Diego
  - Year to date, there have been 11,227 total calls received for all counties
  - 95% of calls received are Ombudsman calls, the rest are health related calls not associated with CCI/Cal MediConnect program.
  - o San Diego took all calls statewide from April 1st to May 5th.
  - The total calls made regarding Cal MediConnect in August were 764, with an average wait time of 11 sec and an average talk time of 7 min, with only 36 abandoned calls.
  - A few trends have been identified; one repeating issue is the need to expedite enrollment when passive enrollment disrupts urgently needed procedures and medications for beneficiaries.

- Some continuity of care issues have been identified when plans require beneficiaries to make requests prior to continuing treatment with their providers, and denying coverage of claims for services received prior to such requests. Problems have risen with this approach as many beneficiaries are unaware they have been passively enrolled at the time they attend their appointment, or have already scheduled appointments with their providers.
- It was noted Amber Cutler has raised the above issue with other stakeholders. While no
  resolution has been adopted thus far, DHCS has issued a draft policy letter regarding the
  above matter.
- Call center representatives from Medicare have been redirecting beneficiaries to Health Care Options instead of processing Cal MediConnect disenrollments and reenrolling beneficiaries into their former Medicare Part D plans.
- o CMS has shifted the policy regarding how to handle the above requests in an effort to resolve these claims.

#### HICAP

- o The August call volume remained high with 900 calls received.
- o Intake volume was closer to average for the month of August as compared to July (when intake was double).
- One call screener and one counselor were added to staff in the last six weeks.
- On average, there was an opt-out rate of 70% as reported by the Department of Aging (the Cal MediConnect Dashboard presents a 45% opt-out rate).
- o The majority of consumers are still directed to State Health Care Options (HCO) while 20% are referred to the Ombudsman.
- O These trends are not expected to continue as open enrollment approaches for regular Medicare.

#### • CCI Advisory Committee Members

- Healthy San Diego and Health Care Options staff at the Family Resource Centers (FRC's) received referrals from the Consumer Center for Health Care Advocacy (CCHEA) to work on complicated issues that at times take multiple staff members to resolve.
- When issues cannot be resolved consumers are referred to speak directly to the State DHCS office.
- The majority of issues are regarding consumer's needs in Medi-Cal and not the Cal MediConnect program.
- o It was also noted more consumers who have opted out of a Cal MediConnect plan are visiting FRC's to receive help enrolling in a Medi-Cal Managed Care plan.

#### **CCI Updates**

## CCI Health Plans

- The State has collaborated with the Consumer Center in efforts to resolve problems. The Regional Center reports on issues that have been resolved.
- o Health Plans have implemented methods to overcome standard issues.
- Community Health Group reported doing well with Cal MediConnect after shifting procedures for processes such as reviews for skilled nursing facilities that proved time consuming before.
- o Members were reported being upset by the high volume of informative calls they receive.
- o It was noted it can take up to 45 days for high risk clients to receive an assessment call.
- All plans reported having encountered issues regarding outdated client information.

- o Care1st noted they have encountered discrepancies in 40% of their client's contact information.
- o Health Net reported having encountered similar issues, making it difficult to contact clients, particularly the homeless population.
- o Identity, privacy and confidentiality were noted as major issues.
- o Health plans discussed having contacted the County and State to obtain up-to-date client information, however the information provided is also outdated.
- o It was discussed that creative solutions are needed to locate and get in touch with clients.

# Harbage Consulting Update

- Outreach was a major focus last month reaching out to faith and ethnic based communities, food suppliers, The Hunger Coalition, the Alliance for Reasonable Solutions and North County homeless providers.
- Harbage has continued to gather issues as they arise.
- Kim Huynh met with the manager of Meals on Wheels and will conduct training with their drivers.
- o A new promotional flyer has been created and is expected to be distributed via email.
- Collaboration continued with the United Domestic Workers of America (UDW) to provide monthly presentations.
- The partnership with the Viet News director has continued and Harbage will be moving on to secure segments for 3 months in which the work group will control the script.
- o St. Vincent de Paul's has also contributed, holding small consumer presentations.
- Reaching out to libraries has proved to be a resourceful way to transmit information and distribute flyers.
- o Kim will provide two Cal MediConnect trainings/webinars for the FRCs.
- o Harbage has seen a decline in requests for trainings.
- o The Cal MediConnect promotional flyer was approved by the work group with no changes.
- Skilled Nursing Facilities (SNF) Workgroup Update
  - o George Scolari will co-chair the SNF Workgroup.
  - o The Health Plans have provided support and involvement with the workgroup.
  - o There were 82 participants at last meeting.
  - O Joe Diaz distributed a copy of the Evacuation Memorandum of Understanding (MOU) and this will be an added agenda item at the next meeting.
- Healthy San Diego Behavioral Health Workgroup Meeting Update
  - o The Healthy San Diego Behavioral Health workgroup did not meet last month.
  - o The Behavioral Health Operations subgroup meeting did take place.
    - The meeting focused on the individual plan of care for every Cal MediConnect member.
    - The meeting also focused on improving County behavioral provider participation in completing and returning documentation by developing a self-explanatory form that is easy for Psychiatrists to write out and return.
- Community Based Adult Services (CBAS) Update
  - o The transition of CBAS services into the Health Plans has been postponed to October 2014.
  - The transition entails incorporating the Plans into CBAS, in which Plans will be responsible for all care coordination for members immediately upon enrollment.
  - o Plans will also establish reporting guidelines and outcomes to be measured going forward.
- New CCI Fact Sheets
  - o Understanding the Duals Special Needs Plan Policy (DSNIP) NSCLC fact sheet
    - The fact sheets are County specific.
    - The annual election period for HICAP is coming up.

- Notices will be issued to individuals who are DSNIP in October.
- There have been recent reports of marketing violations to boost numbers.
- Instances have risen of brokers visiting Regional Centers to pursue candidates, gift giving to senior center employees and other organizations, and unsolicited home visits.
- Amber Cutler will include the PACE program in the fact sheet as a program option for those not joining a Cal MediConnect plan.
- o The SCAN Foundation California's CCI: August 2014 Update
  - To date, the total number of opt outs reported is 58%.
- Communication Workgroup Update
  - o The Communication Workgroup did not meet; meetings will now be quarterly.
- Cal MediConnect Enrollment Dashboard Report
  - o San Diego is expected to receive 17% of the projection Statewide 1,809 calls in September.
  - o San Diego is expected to receive 2,701 calls in October.
  - o In August there were 8,303 total active enrollments in San Diego.
  - Greg raised a question regarding the projected uneven distribution of 18,346 enrollments in October for Health Net in Los Angeles; Rogelio will look into the uneven projected distribution of enrollments in October for Health Net in LA.

## **Open Discussion on CCI Rollout**

Not discussed.

## Insights from a Pilot Program to Integrate Medical and Social Services—Pam Mokler

- The study performed was to determine if intervention prior to becoming Nursing Home Certifiable can help members stay independent and stay in their plans longer, or not have to disenroll from their plans at all.
- The study took place from September 2010 to 2012 in Maricopa County in Arizona, it was under evaluation between 2012 and 2014, and was published August of 2014.
- The study involved 1,500 members in a Care1st special needs plan, where half were adults with disabilities and seniors, plus the Medicare population, and tested what would happen if a face-to-face assessment was conducted, and a care plan was developed to identify the in-home and community based services that were needed.
- Care1st collaborated with the Saint Luke's Health Foundation— an independent foundation in Phoenix. They also contracted with the non-profit organization Area Agency on Aging (AAA) to perform the face-to-face assessments and determine what in-home and community based services were needed.
- Care1st was able to pay the AAA to conduct case management, face-to-face assessments, the development of a care plan and ongoing case monitoring. Old Americans Act funds were used to pay for the government community based services requested.
- There was a 59% cost benefit savings per member per month for those who received both a face-to-face assessment and in-home and community based services; at 6 months there was a 47% reduction in cost.
- Providing assessments alone proved less effective, as the savings noted at 3 months were 24%; at 6 months there was no cost benefit.
- The primary driver of savings to the health plan was the AAA in home and community based services funded by the Old Americans Act.
- The program is no longer a pilot; it is now permanent.
- The program has been replicated in Pima County.

• The peer reviewed publication was recognized in the health care industry as one of the leading publications for home health and was presented at the American Society on Aging.

# **Miscellaneous Updates and Announcements**

• Harbage extended an invitation for their presentations to all health plans.

# **Suggested October Meeting Agenda Items**

• Suggested October meeting agenda items are to be sent to Jenel.

# **Next Meeting**

The next meeting will be held on October 1, 2014 from 9:30am–11:30am at the San Diego County Medical Society.

Meeting minutes transcribed by Aracely Soriano